U.S. Department of Labor Office of Labor-Management Standards Washington DC 20210

## FORM LM-30 LABOR ORGANIZATION OFFICER AND **EMPLOYEE REPORT**

Form approved Office of Management and Budget No 1215-0188 Expires 11 30-2006

This report is mandatory under P L. 86-257 as amended Failure to comply may result in criminal prosecution fines or civil penalties as provided by 29 U S C 439 or 440



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

	<b>4</b>
1 File Number U 8895	2 Fiscal Year Covered From
	[01] / 01 / 2004 Through 12 / 31 / 2004]
3 Name and address of person filing	4 Name file number and address of labor organization
Name   Robert Lopes	Name - U A Local 350
	Labor Organization File Number 040098
PO Box Bldg Room No If any	P O Box Building and Room Number if any
Street 1110 Greg St	Street 1110 Greg St
City Sparks,	',City'   Sparks
State Nv ZIP Code + 4 89431	- State Nv ZIP Code + 4 89431
5 Position in labor organization	
Enter appropriate data below if during the past fiscal year you or your spo	nuse or minor child directly or indirectly had any of the following interests
(except as specified in the excl	usions set forth in the instructions)
A. Held an interest in engaged in transactions (including loans) with or monetary value from an employer whose employees your organizat	derived income or other economic benefit of ion represents or is actively seeking to represent.
6 Name and address of Employer (including trade name if any)	7 a Nature of Interest, Transaction, or Income
Name	
Trade Name if any	
PO Box Bldg Room No If any	No Reportable Transactions
	7 b Amount.
Street	
City	-0-
State ZIP Code + 4	
Appropriate to the prior to the	nature,
15 Signature and verification. The undersigned declares, under penalty of	Perjury and other applicable penalties of the law that all of the information ving documents) has been examined by the signatory and is to the best of the
Signed Seet open	On _8/15/2005 775-359_2142
l / '	Date Telephone Number

Name of Person Filing ROBELL LOPES	File Number U
B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested	
8 Name and address of Business (including trade name if any)	9 Business deals with
Name	, a Labor Organization
Trade Name if any	b Trust
PO Box, Bldg Room No if any	c. Employer
Street [	
City	The same of the same property and the same of the same
State ZIP Code + 4 i	
10 If 9 b or 9 c is checked give trust or employer's name	11 a Nature of such dealing
Name	
Trade Name if any	No Reportable Transactions
PO Box Bldg Room No If any	
Street '	11 b Approximate dollar value of such dealing -0-
City	12 a Nature of interest held or income received
State ZIP Code + 4	No Reportable Transactions
	12 b Amount
C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value	
13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)	14 a Nature of payment
Name	
Trade Name if any	
PO Box Bldg Room No If any	No Reportable Transactions
Street	
City	
State ; ZIP Code + 4	
13 b is the Business an Employer 1 or Consultant 7	14 b Amount of payment -0-